

# Disclosure Report Cover

OCT 24 2012

Amendment

☐ Yes ☐ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.  
Do not use this form to update information.

## 1. Committee Information

a. Full Name <u>PrueH Walden</u>	c. ID Number <u>0J6B1B</u>
b. Mailing Address (include City, State and Zip Code) <u>172 Eastover Dr.</u> <u>Forest City NC 28043</u>	d. Date Filed <u>10/24/12</u>
	e. Phone Number <u>828-245-5120</u>

2. Report Year <u>2012</u>	3. Period Start Date (mm/dd/yy) <u>7-1-12</u>	4. Period End Date (mm/dd/yy) <u>10/24/12</u>	5. Treasurer Full Name <u>PrueH Walden</u>
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input checked="" type="checkbox"/> Third	<input type="checkbox"/> Annual
		Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name		
<input type="checkbox"/> Booster Fund				
<input type="checkbox"/> Building Fund				
<input type="checkbox"/> Other:				
8. Number of Fundraisers this Report				

## 11. Account Information

a. Financial Institution Full Name <u>BB+T</u>		a. Financial Institution Full Name	
b. Purpose <u>Campaign</u>	c. Account Code <u>—</u>	b. Purpose	c. Account Code
	d. Period Begin Balance <u>\$ 1209.62</u>		d. Period Begin Balance

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

PrueH Walden

Printed Name of Signer

PrueH Walden

Signature of Appointed Treasurer

10/24/12

Date

## FOR OFFICE USE ONLY

Date Received:	<u>10/24/12</u>	Employee:	<u>DL</u>	Delivery Method
Date Postmarked:	_____	Employee:	_____	<input type="checkbox"/> Normal Mail
Date Scanned:	_____	Employee:	_____	<input type="checkbox"/> Registered Mail
Date Data Entered:	_____	Employee:	_____	<input checked="" type="checkbox"/> Hand Delivered
				<input type="checkbox"/> Electronically Filed
				<input type="checkbox"/> Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

# Detailed Summary

Amendment  
☐ Yes ☐ No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
Pruett Walden		Third	056B18
Start of Election Cycle: January 1, 2012		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1209.62	\$
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	
6) Contributions from Individuals (CRO-1210)	\$ 1150.00	\$ 1428.00	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$ 1000.00	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$ 1140.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)	\$	\$	
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)	\$	\$	
11e) Exempt Purchase Price Sales (CRO-1265)	\$	\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$ 1150.00	\$ 3568.00	
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)	\$ 2326.25	\$ 3470.63	
13b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
13c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
14) Aggregated Non-Media Expenditures (CRO-1315)	\$	\$	
15) Loan Repayments (CRO-1420)	\$	\$	
16) Refunds/Reimbursements from the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$	\$ 64.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$ 2326.25	\$ 3534.63	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)	\$ 33.37	\$ 33.37	
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$		
22) Debts and Obligations owed by the Committee (CRO-1610)	\$		
23) Debts and Obligations owed to the Committee (CRO-1620)	\$		
24) Account Transfers Within the Committee (CRO-1720)	\$		
25) Administrative Support (CRO-1710)	\$	\$	
26) Forgiven Loans (CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum (CRO-2220)	\$	\$	
28) Contributions to be Refunded (CRO-1215)	\$	\$	

# Contributions from Individuals

Pg 1 of 4 Amendment ☐ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable) <u>Pruett Walden</u>					2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Pruett Walden</u> <u>172 Eastover Dr</u> <u>Forest City NC 28043</u>				b. Job Title/Profession <u>Retired</u>		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date \$
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>10/15/12</u>	k. Amount \$ <u>200.00</u>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Grauer Bradley</u> <u>276 J Morgan St</u> <u>Forest City NC 28043</u>				b. Job Title/Profession <u>Retired</u>		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date \$
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>8/9/12</u> <u>5/26/12</u>	k. Amount \$ <u>100.00</u>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Chuck Summoy</u> <u>245 Georgia Ave</u> <u>Forest City NC 28043</u>				b. Job Title/Profession <u>Retired</u>		d. Comments
				c. Employer's Name/Specific Field		e. Election Sum to Date \$
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>9/25/12</u>	k. Amount \$ <u>100</u>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ <u>400.00</u>	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ <u>1150</u>	

# Contributions from Individuals

Pg 2 of 4 Amendment ☐ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable) <i>Kevin Walden</i>				2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Jarah Cato</i> <i>4001 NC Hwy 86N</i> <i>Hillsborough NC 27278</i>			b. Job Title/Profession <i>Retired</i>		d. Comments
			c. Employer's Name/Specific Field		e. Election Sum to Date \$
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>9/25/12</i>	k. Amount \$ <i>100.00</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Gail Strickland</i> <i>1373 old Hwy 74</i> <i>Ellenboro NC 28040</i>			b. Job Title/Profession <i>Retired</i>		d. Comments
			c. Employer's Name/Specific Field		e. Election Sum to Date \$
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy) <i>9/28/12</i>	k. Amount \$ <i>50.00</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Julia Henaley</i> <i>811 N. Washington St</i> <i>Rutherfordton NC 28139</i>			b. Job Title/Profession <i>Retired</i>		d. Comments
			c. Employer's Name/Specific Field		e. Election Sum to Date \$
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <i>check</i>	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount \$ <i>50.00</i>
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ <i>200.00</i>
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ <i>1150.-</i>

# Contributions from Individuals

Pg 3 of 4 Amendment ☐ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable) <u>Puett Walden</u>					2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>CC Velt</u> <u>314 arlington st</u> <u>Forest City NC 28043</u>			b. Job Title/Profession <u>Retired</u>		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date \$	
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>10/1/12</u>	k. Amount \$ <u>100.00</u>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Keith Webb-McGill Eng,</u> <u>P087</u> <u>Alexander NC 28701</u>			b. Job Title/Profession <u>McGill Engineering</u>		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date \$	
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>10/3/12</u>	k. Amount \$ <u>125.00</u>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Denise Martin</u> <u>38 orange st</u> <u>Asheville NC 28801</u>			b. Job Title/Profession <u>Martin McGill</u> <u>Engineering</u>		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date \$	
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>10/3/12</u>	k. Amount \$ <u>125.00</u>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ <u>350.-</u>	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ <u>1150.-</u>	



# Contributions from Individuals

Pg 4 of 4 Amendment ☐ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable) <u>Piney Walden</u>					2. ID Number	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Jack Fultz</u> <u>727 E. Main St</u> <u>Farmville NC 28043</u>			b. Job Title/Profession <u>Retired</u>		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$	
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment <u>check</u>	i. In-Kind Description	j. Date (mm/dd/yyyy) <u>10/8/12</u>	k. Amount \$ <u>200.00</u>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$	
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field		e. Election Sum to Date	
					\$	
f. Prior <input type="checkbox"/>	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ <u>200.00</u>	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ <u>1150.-</u>	

# Disbursements

Pg 1 of 4 Amendment ☐ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Russett Walden						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
WC AB PO 511 Rutherfordton NC 28139						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	check		8/31/12	\$ 360.00		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
Chase High Bond Boosters 1603 Chase High Rd Forest City NC 28043						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	check		9/26/12	\$ 200.00		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
Promotions R US 731 S. Broadway Forest City NC 28043						
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	check		9/26/12	\$ 89.26		
	check		10/7/12	\$ 371.49		
5. Total only this Page					\$ 1020.75	
6. Total of ALL CRO-1310 Pages						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 2326.25	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

# Disbursements

Pg 24 of      Amendment ☐ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
<i>Puett Walden</i>						
<b>3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.)</b>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
<i>Promotions R US</i> <i>731 S. Broadway St</i> <i>Forest City NC 28043</i>				<b>c. Level Registered (Specify)</b>		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				<b>e. Election Sum to Date</b>		\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
	<i>check</i>		<i>10/15/12</i>	<i>\$ 89.26</i>		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
<i>Bush Signs</i> <i>300 May St</i> <i>Montgomery ala, 36104</i>				<b>c. Level Registered (Specify)</b>		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				<b>e. Election Sum to Date</b>		\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
	<i>check</i>		<i>9/12/12</i>	<i>\$ 335.24</i>		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>
<i>WAGY</i> <i>129 N. Powell St</i> <i>Forest City NC 28043</i>				<b>c. Level Registered (Specify)</b>		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				<b>e. Election Sum to Date</b>		\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
	<i>check</i>		<i>10/8/12</i>	<i>\$ 106.00</i>		
				\$		
<b>5. Total only this Page</b>					<i>\$ 524.50</i>	
<b>6. Total of ALL CRO-1310 Pages</b>						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					<i>\$ 2326.25</i>	
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)						
<b>A* - Media</b>		<b>B* - Printing</b>		<b>C* - Fundraising</b>		<b>D - To Another Candidate</b>
<b>E - Salaries</b>		<b>F* - Equipment</b>		<b>G - Political Party</b>		<b>H* - Holding Public Office Expenses</b>
<b>I - Postage</b>		<b>J - Penalties</b>		<b>K* - Office Expenses</b>		<b>Q* - Donation to Legal Expense Fund</b>
<b>O* Other</b>						
* Codes require detailed explanation in required remarks field (k)						



# Disbursements

Pg 3 of 4 Amendment ☐ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable) <u>Pennett Walden</u>						2. ID Number	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) <input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Duffus Cooper</u> <u>671 oak st</u> <u>Forest city nc 28043</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment <u>check</u>	h. Purpose Code	i. Date (mm/dd/yyyy) <u>10/9/12</u>	j. Amount \$ <u>30.00</u>	k. Required Remarks		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Daily Courier</u> <u>PO 1149</u> <u>Forest city nc 28043</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment <u>check</u>	h. Purpose Code	i. Date (mm/dd/yyyy) <u>10/10/12</u>	j. Amount \$ <u>500.00</u>	k. Required Remarks		
				\$			
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <u>Rutherford Weekly</u> <u>369 Butler Rd</u> <u>Forest city nc 28043</u>				b. Coordinated Committee Name		d. Comments	
				c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$	
f. Account Code	g. Form of Payment <u>check</u>	h. Purpose Code	i. Date (mm/dd/yyyy) <u>10/15/12</u>	j. Amount \$ <u>176.00</u>	k. Required Remarks		
				\$			
5. Total only this Page						\$ <u>706.00</u>	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						\$ <u>2326.25</u>	
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							

# Disbursements

Pg 4 of 4 Amendment ☐ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
<div style="font-family: cursive; font-size: 1.2em;">Pruett Walden</div>						
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  <div style="font-family: cursive; font-size: 1.2em;">           Kima Imazery            418 Chisholm Trail            Rutherfordton NC 28139         </div>				<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>d. Comments</b>  <b>e. Election Sum to Date</b> \$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	check		10/15/12	\$ 75.00		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>d. Comments</b>  <b>e. Election Sum to Date</b> \$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)				<b>b. Coordinated Committee Name</b>  <b>c. Level Registered (Specify)</b> <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		<b>d. Comments</b>  <b>e. Election Sum to Date</b> \$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
<b>5. Total only this Page</b>					\$ 75.00	
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 2326.25	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i>						
<i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i>						
<i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						